

WYOMING TITLE XXI PROGRAM FACT SHEET

Name of Plan:	Wyoming Kid Care
Date Plan Submitted:	August 5, 1999
Date Plan Approved:	September 8, 1999
Effective Date:	April 1, 1999
Date First Amendment Submitted:	March 16, 2001
Date First Amendment Approved:	June 13, 2001
Effective Date:	September 1, 2001
Date Second Amendment Submitted:	June 20, 2002
Date Second Amendment Approved:	September 18, 2002

Background

- On August 5, 1999, Wyoming submitted their initial Title XXI State plan, now called Kid Care B, to establish a separate child health program. Kid Care B provides coverage to children up to age 19 in families with family incomes below 133 percent of the Federal Poverty Level (FPL), who are not eligible for Medicaid.
- Wyoming's current Medicaid program, renamed Kid Care A as of April 2001, covers children through age 5 up to 133% of the FPL and children ages 6 through age 18 up to 100% of the FPL. Kid Care B covers children ages 6 through age 18 up to 133% of the FPL who are not eligible for Medicaid.

Amendments

- Wyoming submitted its first amendment on March 16, 2001. This amendment established a new program, Kid Care C, to provide coverage to children between 134% and 150% of the FPL. Under this program, families will have the option of obtaining health insurance coverage from eligible employers' plans or from the private health insurance market. The state has postponed the implementation of Kid Care C.
- Wyoming submitted its second amendment on June 20, 2002. This amendment updates and amends the SCHIP state plan to indicate the State's compliance with the final SCHIP regulations.

Children Covered Under the Program

- The State reported that 4,652 children were ever enrolled in its program during Federal fiscal year 2001.

Administration

- The Community and Family Health Division of the Wyoming Department of Health (WDH), working closely with the Kid Care coalition, and administers Kid Care B.

Health Care Delivery System

- Kid Care B services are provided through the delivery system already established for Kid Care A, the Medicaid program.
- The delivery system through which both Medicaid and Kid Care B operate is a fee-for-service model. The penetration rate for managed care is low in Wyoming and there is no Medicaid managed care program or a primary care case management program.
- WDH has Medicaid provider agreements with approximately 95% of primary care physicians and with all in-state hospitals. There are no variations of service delivery based on geography. Providers with Medicaid agreements will be automatically eligible to expand their population served to include Kid Care B participants. Kid Care B participants have the same choice of providers as Medicaid enrollees in their area.

Benefit Package

- Benefits provided under Kid Care B are the same services as provided under the Wyoming Medicaid program.

Crowd-Out Strategy

- An applicant is ineligible for Kid Care B if the applicant has voluntarily terminated their group health plan or individual coverage within the month prior to the application date for coverage.
- If a parent who is providing the primary insurance is fired, laid off, can no longer work because of a disability, or has a lapse in insurance coverage because he/she obtains new employment, the child may be eligible for Kid Care B.
- Wyoming will monitor for crowd out and develop and implement strategies to prevent crowd out if monitoring indicates crowd-out is occurring.

Cost Sharing

- No cost sharing is imposed for Kid Care B.

State Outreach and Enrollment Activities

- Wyoming Kid Care uses an outreach and marketing campaign developed under the Robert Wood Johnson Foundation "Covering Kids and Families" grant to inform families of children likely to be eligible for Kid Care or other public or private health coverage programs.

- The Covering Kids and Families program staff facilitate state and local efforts to design and conduct outreach programs; simplify the enrollment processes; coordinate existing coverage programs for low-income children; and increase the number of children and families who benefit from existing coverage programs.
- The Covering Kids and Families statewide coalition includes representatives from child advocacy organizations, education organizations, health care provider associations, the insurance industry, and other public and private providers who are concerned with children's health. Direct appeals are made using press releases, public service announcements, print media, radio and television, and printed materials.
- The Kid Care program works closely with Native American leaders to develop specific outreach activities that are acceptable to the tribes.
- Wyoming "Covering Kids and Families" also used TANF "set aside" funds to expand outreach.

Coordination Between SCHIP and Medicaid

- All Kid Care Plans use a single eligibility form. The application contains the information necessary to determine eligibility for all Kid Care programs. The application is screened for Kid Care A (Medicaid) eligibility prior to determining eligibility for Kid Care B.

Financial Information

Kid Care B - FFY 2001

Enhanced Federal Matching Rate-75.22%

Federal Share -- \$2,356,646

State Share -- \$776,359

Total -- \$3,133,005

Kid Care B - FFY 2002

Enhanced Federal Matching Rate-73.38%

Federal Share --\$3,662,341

State Share -- \$1,328,584

Total -- \$4,990,925

Last Updated: September 20, 2002